

INTERGOVERNMENTAL AGREEMENT

BETWEEN

THE ARIZONA DEPARTMENT OF HEALTH SERVICES

AND

THE ARIZONA DEPARTMENT OF ECONOMIC SECURITY

Pursuant to ARS 11-952 and 36-3435 this Intergovernmental Agreement (Agreement) is entered into by and between the Arizona DEPARTMENT OF HEALTH SERVICES (ADHS) an agency of the State of Arizona and the Arizona DEPARTMENT OF ECONOMIC SECURITY (ADES), an agency of the State of Arizona.

WHEREAS, ADES is authorized to execute and administer contracts, ARS 41-1954.1 et seq., and is responsible for the Division of Children, Youth and Families (DCYF), and;

WHEREAS, the Arizona Department of Health Services is authorized to execute and administer contracts in exercising its administrative supervision of the Regional Behavioral Health Authorities (RBHAs), ARS 36-104, and is recognized by Arizona statute as the Children's Behavioral Health System, and;

WHEREAS, ADES is responsible for providing comprehensive medical care, including some behavioral health services, to dependent children in ADES custody pursuant to A.R.S. 8-512, and ADHS is responsible for implementing a comprehensive behavioral health system for eligible children, including children in ADES custody, pursuant to A.R.S. 36-3431, and;

WHEREAS, ADES and ADHS desire to work together and jointly exercise their respective powers to provide and strengthen behavioral health services to families served by ADES;

Now, THEREFORE, in consideration of the mutual promises and undertakings contained herein, and for other good valuable consideration, the parties hereby agree as follows:

I Agreement Term

The term of this Agreement shall begin on the date when filed with the Secretary of State and shall remain in effect until December 31, 2004 unless terminated pursuant to Section V.P.

II Compliance with Behavioral Health Standards

By signing this Agreement, each party agrees that the individual executing this Agreement is empowered to commit the party to perform as defined herein. Each party agrees and

NO. 23939

Filed with the Secretary of State

Date Filed: 04/13/00

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recognizes that the Behavioral Health Standards as defined herein are hereby incorporated by reference and shall, where applicable, define the performance of each party.

III Definitions

"Accessible" means that a covered behavioral health service can be obtained by an Eligible Child within the time frames established in the Behavioral Health Standards.

"Administration for Children, Youth and Families (ACYF)" means the subdivision of the Division of Children, Youth and Families (DCYF) within the Department of Economic Security. Services include children's services such as Child Protective Services (CPS), Adoption Services, and Child Abuse Prevention and Treatment Services.

"Administration for Children, Youth and Families Case Manager" means a person employed by or contracted with DES to provide case management services for Eligible Children receiving services within the DES Division of Children, Youth and Families Services. The ACYF Case Manager is the Eligible Child's Child Welfare case manager and shall have the responsibility for incorporating the child's Individual Service Plan, completed by the RBHA Case Manager or RBHA designee for behavioral health services into the overall Child Welfare Case Plan.

"AHCCCS" means the Arizona Health Care Cost Containment System.

"Available" means that a covered behavioral health service can be obtained by an Eligible Child regardless of whether or not the responsible RBHA offers such service.

"Behavioral Health Provider" means the organization and/or behavioral health professionals qualified in accordance with Behavioral Health Standards, including appropriate licensure and/or certification. A Behavioral Health Provider must maintain a contract with the referring RBHA and if reimbursed by Title XIX/Title XXI funds, must also be registered with AHCCCS to provide the specific behavioral health services being delivered.

"Behavioral Health Services" are those Title XIX and Title XXI covered services that may be reimbursed with Title XIX/Title XXI funds for behavioral health or substance abuse disorders provided that the services are medically necessary; contained in the approved individual service plan, when required; approved through the prior authorization process, if appropriate; and meet the requirements set forth in the ADHS/DBHS Policy Manual.

"Behavioral Health Standards" means the standards established by AHCCCS, DHS, federal law, state statute and rule, and any subsequent amendments. At a minimum, these standards shall include the ADHS/DBHS Policy Manual and the ADHS Quality Management Plan.

"Case Coordination" is provided to Eligible Children who are in need of behavioral health services but who do not need moderate to intensive case management. Case coordination activities are limited to basic individual service plan development, identification of service providers, monitoring, updates, and follow-up, when necessary. Case coordination must be provided by a service provider who meets the qualifications for provision of case management as specified in the Behavioral Health Policy Manual.

"Child Protective Service (CPS) District Mental Health Specialist" is an individual who coordinates at the District level the provision of behavioral health services for the Division of Children, Youth and Families (DCYF) Eligible Children.

"Child Welfare Services" means a program of identifiable and specialized child welfare services which seeks to prevent dependency, abuse and exploitation of children by reaching out with social services to stabilize family life, and to preserve the family unit by focusing on families where unresolved problems have produced visible signs of dependency or abuse and the home situation presents actual and potential hazards to the physical or emotional well-being of children. The program shall seek to strengthen parental capacity and ability to provide good child care.

"Comprehensive Medical and Dental Program (CMDP)" is the program in the Department of Economic Security, Division of Children, Youth and Families, through which the state provides health care to foster children in the custody of DES, Arizona Department of Juvenile Corrections and County Juvenile Probation Offices. For the purposes of Title XIX and Title XXI, CMDP is an AHCCCS Health Plan.

"Department of Economic Security Division of Child, Youth and Families (DES/DCYF)" is the division within DES that provides services to Eligible Children who are abused, neglected, abandoned or exploited. Services include the provision of health care to foster children.

"DES Case Record" is the official written collection of information maintained by the ACYF Case Manager regarding an Eligible Child, his/her family, and the services provided. It includes, but is not limited to, contact notes; social histories; staffing minutes; medical, psychological, and educational information; legal documents; correspondence; and DES forms. The "Medical Record" and the Child Welfare Service Plan are part of the DES Case Record.

"DES Service Team" means any individual directly involved in the provision of services to a child/family, including the ACYF Case Manager, supervisor, licensing worker, other department or contracted personnel such as foster parents, psychologists, parent aides and the RBHA Case Manager if the child receives intensive case management behavioral health services. The team may also include physicians, school personnel, court appointed special advocates and attorneys.

"DES" means the Arizona Department of Economic Security.

"DHS" means the Arizona Department of Health Services.

"Eligible Child" is a child who is determined Title XIX eligible, pursuant to A.R.S. 36-3901(4)(b), and who is under the age of 18, is in need of behavioral health services which can be reimbursed with Title XIX funds as prescribed in A.R.S. 36-2907.01 and who is an in-home or an out-of-home child. An "Eligible Child" may also be a child who is determined Title XXI eligible, pursuant to A.R.S. 36-2983 and who is under the age of 19, is in need of behavioral health services which can be reimbursed with Title XXI funds as prescribed in A.R.S. 36-2989 (12) (13) and who is an in-home or an out-of-home child.

"Emergency Behavioral Health Services" are covered services provided after the sudden onset of a behavioral health or substance abuse condition, manifesting itself by acute symptoms of sufficient severity, that the absence of immediate medical attention could result in placing the eligible person's health in serious jeopardy, serious impairment of bodily functions, serious dysfunction of any bodily organ or part, or serious behavioral dysfunction to indicate the eligible person is a danger to self or others.

"In-Home Child" means a child with an assigned case manager within DES/DCYF/ACYF who is in the physical custody of the parent(s) or guardian.

"Individual Service Plan (ISP)" is a specific plan of treatment developed for each eligible person that specifies behavioral health services, service units, anticipated time frames, and provider(s) of care.

"Medically Necessary" means those covered services provided by a qualified service provider within the scope of their practice. Under state law or certification, whichever is applicable, medically necessary services are provided to prevent disease, disability, and other adverse health conditions or their progression, or to prolong life.

"The Model Court Project" means the expedited judicial process involving children who are victims of child abuse, neglect or abandonment.

"Out-of-Home Child" means a child who has an assigned case manager within DES/ACYF, who does not reside with their custodial parent or guardian and who is placed pursuant to court order or on a voluntary foster placement agreement with:

- A responsible person in the community, pursuant to Juvenile Court Order.
- Licensed family foster care
- Licensed group facility (e.g. Shelter, Group Home)
- Relative(s)

"PBHP" means a primary behavioral health professional. When applicable, eligible children will be assigned to a PBHP who is responsible for the overall direction and coordination of care.

"Prior Authorization" is the process by which the appropriate entity (RBHA, AHCCCS Health Plan, or ALTCS Program Contractor) reviews and authorizes the initiation of certain behavioral health services including medically necessary partial care, non-emergency transportation and inpatient services.

"Quality Management Plan" is the document which outlines the Quality Management Structure that will be utilized for behavioral health services. The Quality Management Plan" includes guidelines for Quality Management and Improvement, Program Requirements, Utilization Management, and Finance and Operations.

"RBHA Case Manager" means an individual, contracted or employed by a RBHA, who, in conjunction with the multidisciplinary clinical team, PBHP or primary therapist is responsible for developing, arranging, and monitoring the most cost-effective and clinically appropriate Individual Service Plan for delivering behavioral health services to an Eligible Child.

"Regional Behavioral Health Authority (RBHA)" is an organization under contract with ADHS to coordinate the delivery of behavioral health services in a geographically specific service area of the state for certain eligible persons.

IV Mutual Objectives

Subject to the provisions of A.R.S. 36-2907.01, this Agreement is entered into for the purpose of achieving the following objectives:

- A. To require that DHS and RBHAs make comprehensive, cost-effective behavioral health service available and accessible to Eligible Children within the time frames established in the Behavioral Health Standards.
- B. To require that DES and DHS coordinate, communicate, and provide timely exchange of information necessary for the establishment, maintenance, payment, and enhancement of activities for the provision of behavioral health services including compliance with court ordered treatment to all Eligible Children.
- C. To ensure that there is an adequate and appropriate network of behavioral health services and providers available to meet the needs of the Eligible Child and their families.

- D. To require that Title XIX and Title XXI behavioral health services are provided to Eligible Children in the least restrictive, most appropriate settings, and in accordance with Behavioral Health Standards, and when applicable, in compliance with orders of the Juvenile Division of the Arizona Superior Court.
- E. To foster the development of an integrated behavioral health system, under the direction of DHS, which takes into account the needs of Eligible Children.
- F. To establish criteria for financial responsibility between DES and DHS.
- G. To participate in the periodic review and revisions of the Operations Manual and to jointly manage the procedures outlined in the Operations Manual.
- H. To work together to implement Title XIX reimbursable Therapeutic Foster Homes.

V Agency Responsibilities

This section identifies the responsibilities of DHS and DES in achieving the mutual objectives in Section IV.

A. RBHA Contracts

1. DHS shall establish contracts with RBHAs which incorporate the provisions of this Agreement and which hold the RBHAs accountable for complying with Behavioral Health Standards for all Eligible Children.
2. DHS shall require that all medically necessary Title XIX and Title XXI covered behavioral health services are available and accessible to all Eligible Children on a statewide basis.
3. DHS shall make available to DES upon request a complete copy of each RBHA contract, or amendment thereto, within fifteen (15) days of the request for those contracts or amendments. If the effective date of the RBHA contract, or amendment precedes the effective date of this Agreement, then DHS shall provide DES a copy of the RBHA contract or amendment with fifteen (15) days of the effective date of this Agreement. Copies shall include all documents and information incorporated by reference into the RBHA contract.
4. DHS shall require that the RBHAs furnish the personnel, facilities, equipment, supplies and other items and expertise necessary for, or incidental to, the provision of behavioral health services to Eligible Children as specified in the Agreement.

5. DHS shall provide to DES upon request a listing of provider services by RBHA which are licensed, registered, and under contract.

B. Training

1. DES Responsibilities

DES, in coordination with DHS, AHCCCS and the RBHAs, will develop and provide training to the RBHAs regarding the screening and referral process to DES for the determination of Title XIX eligibility.

2. DHS Responsibilities

DHS, in coordination with DES, AHCCCS and RBHAs, will collaborate in the training process to the RBHAs regarding the screening and referral process to DES for the determination of Title XIX eligibility.

C. Referral and Intake Processes

1. DES Responsibilities

- a. DES shall refer all Eligible Children to the appropriate RBHA based on the child's Court of Jurisdiction. For Eligible Children who are not adjudicated dependent, the address of the parent or guardian shall be used for purposes of referral to a RBHA.
- b. Whenever appropriate, and in order to maximize federal funds, DES shall place children who have a pending Title XIX application or for whom a Title XIX application will be taken, with Title XIX registered RBHA providers to enhance the ability of DHS to provide continuity of service when Title XIX eligibility is established.
- c. DES shall obtain prior authorization from the RBHA for any psychiatric inpatient admission of an Eligible Child, per ADHS/DBHS Policy and Procedure Manual, 2.11. In an emergency, DES is responsible for notifying the RBHA within 24 hours of admission. In an emergency prior authorization is not required, however the emergency admission shall be evaluated by the RBHA utilizing ADHS/DBHS Admission Criteria for Acute Inpatient Psychiatric Hospitalization. Based on the Admission Criteria, the RBHA may retrospectively authorize the admission back to the date of admission in accordance with ADHS/DBHS Policy 2.11. DES shall also ensure access to the Eligible Child and needed medical records.

- d. DES shall ensure that the appropriate RBHA is advised in writing of all time frames and requirements for behavioral health services within twenty-four (24) hours of any written or oral notification of Juvenile Court action.
- e. Title XIX eligible adoption subsidy children who are enrolled in an AHCCCS Health Plan shall be referred to the appropriate RBHA for behavioral health services.

2. DHS Responsibilities

- a. DHS shall require that behavioral health services are available and accessible on a statewide basis.
- b. DHS shall require that RBHAs or a RBHA designee provide intake, evaluation, diagnosis and treatment planning services in accordance with Behavioral Health Standards and within required time frames. The RBHA will provide written notification, in accordance with Behavioral Health Standards and established time frames, to the assigned ACYF Case Manager or Mental Health Specialist or authorized designee of the findings and subsequent decisions to accept or reject an Eligible Child for services.
- c. DHS shall require the RBHA to notify the ACYF Case Manager or authorized designee within twenty-four (24) hours of any identified Eligible Child who receives emergency or acute behavioral health services. DHS shall require that the RBHA allow DES access to the child's RBHA case records for purposes of meeting DES responsibilities including those with the Juvenile Court.
- d. In accordance with the Behavioral Health Standards and upon identification of an Eligible Child with behavioral health service needs, DHS shall require that the RBHA make intake appointments available and provide to DES any changes to Intake procedures within two weeks prior to the effective date of the change.

D. Evaluation, Diagnosis and Treatment Planning

1. DES Responsibilities

- a. DES shall make the appropriate DES case record documentation available within five (5) working days of the RBHA's request or prior to intake whichever is sooner. DES shall assist in obtaining other needed Eligible Child's records necessary for the provision of behavioral

health services. DES case record documentation shall not be required prior to intake in emergency situations; DES shall provide documentation within one working day of an emergency intake.

- b. DES shall require that the ACYF Case Manager or designee is a member of and participates in the RBHA treatment staffings and ISP development process. Participation shall be documented by the ACYF Case Manager's signature on the ISP. This signature means that the ACYF Case Manager has participated in the planning process. An ACYF Case Manager signature is required as the consent for treatment and on ISPs for children who are adjudicated dependent.

2. DHS Responsibilities

- a. DHS shall require that RBHAs perform evaluation, diagnosis and treatment planning services in accordance with Behavioral Health Standards for all Eligible Children referred. DHS shall require that RBHAs provide to DES/CMDP the findings for each Eligible Child referred within five (5) working days of completion of the screening to determine the need for behavioral health services.
- b. DHS shall require that the RBHA include a Behavioral Health Professional with expertise relevant to the problematic history (i.e. child abuse, negligence, sexual abuse and adoption) for each case managed Eligible Child with moderate to intensive service needs, as determined in accordance with DHS policy. This qualified behavioral health professional shall have a minimum of three (3) years experience in treating children who have suffered from abuse or neglect, except if otherwise agreed to by DES and DHS. DHS shall monitor RBHA compliance with these requirements and provide a report of findings to DES on this matter upon request.
- c. DHS shall require the RBHAs to include the ACYF Case Manager as a participant in the treatment staffings and ISP development process through notification of the meeting(s) time and place.
- d. DHS shall require that the RBHA Case Manager or RBHA designee prepare an ISP which implements the treatment plan in the form and format prescribed in Behavioral Health Standards. The initial ISP, all subsequent ISPs, and any changes in providers or level of care shall be developed in collaboration with the ACYF Case Manager and include the dated signature of the ACYF Case Manager.

E. Provider Network

1. DES Responsibilities

- a. Upon request, DES shall provide DHS with an updated listing of the DES provider network.
- b. DES shall designate a representative to be notified of changes in the Provider Network based on the requirements of the DHS Provider Network Notification Policy. DES shall notify DHS within five days of receipt of the notification if the proposed change in the provider network negatively impacts service delivery for Eligible Children.

2. DHS Responsibilities

- a. DHS shall ensure that a Statewide network of behavioral health providers is available to provide and make available and accessible behavioral health services to Eligible Children.
- b. Licensure and certification consistent with Behavioral Health Standards shall be the responsibility of DHS.
- c. Upon request, DHS shall provide to DES a current listing of all licensed behavioral health facilities for children.
- d. DHS shall require the RBHAs and their providers to observe and abide by all applicable state and federal statutes and regulations regarding use or disclosure of applicants for and recipients of contract services. Upon request from DES, the RBHA shall forward the requested information. Nothing in this section shall imply restriction of information between DES and the RBHA.
- e. DHS shall require that the RBHAs comply with the Notification of Change in the Provider Network Policy.
 - i. DHS shall provide the entire roster of names of state agency and RBHA designated individuals, addresses, fax numbers and phone numbers to DES upon request.
 - ii. DHS shall meet with DES and the RBHA within five days of receipt of notification from DES that a provider network change will negatively impact DES eligible children.

F. Case Management

1. DES Responsibilities

- a. For issues arising as a result of treatment decision disagreements between DES and the RBHA, the ADHS/DBHS Policy 2.16, Title XIX and Title XXI Children, General Mental Health and Substance Abuse Appeal Process shall be followed.
- b. The ACYF Case Manager's supervisor shall notify the appropriate RBHA Case Manager or RBHA designee of any changes to DES case management assignments within two (2) working days of the change.
- c. DES shall follow the Hierarchy of Case Management Services and the State Agency Responsibility Matrix (Appendix A) regarding case management services.
- d. DES shall provide DHS written notice and a request for review and comment on any policy changes related to behavioral health services for children 30 days prior to the effective date of the policy change. For changes required by state or federal mandate, the comment period may be less than 30 days and the policy change may be retroactive.

2. DHS Responsibilities

- a. DHS shall require that the RBHA notify the appropriate ACYF Case Manager of any assignment or change in RBHA Case Manager or RBHA designee assignment within two (2) working days of the assignment or change in assignment.
- b. DHS shall require the RBHA to be financially responsible for medically necessary Behavioral Health Services contained in the ISP and approved by the RBHA in accordance with DHS/BHS policy.
- c. DHS shall require that a RBHA determine the appropriate need for case management services for each referred Eligible Child and perform behavioral health case manager responsibilities in a manner consistent with Behavioral Health Standards and the provisions of this Agreement.
- d. DHS shall require that each referred Eligible Child who does not meet the criteria for moderate to intensive case management receive case coordination services from the RBHA in a manner consistent with Behavioral Health Standards and the provisions of this agreement.

- e. DHS shall provide DES written notice and a request for review and comment on any policy changes related to behavioral health services for children, including ADHS/DBHS Policy 2.16, Title XIX and Title XXI, Children, General Mental Health and Substance Abuse Appeal Process, 30 days prior to the effective date of the policy change. For changes required by state or federal mandate, the comment period may be less than 30 days and the policy change may be retroactive.
- f. DHS and the RBHAs shall follow the Hierarchy of Case Management Services and the State Agency Responsibility Matrix (Appendix A) regarding Case Management Services.
- g. Children who are eligible for Title XXI shall receive medically necessary behavioral health services from the RBHA up to the limit of services as set forth in A.R.S. 36-2989 (12)(13).
- h. The RBHA Case Manager or RBHA designee shall facilitate the child's discharge planning, preparation of the discharge summary and closure of behavioral health services through the RBHA. The RBHA or RBHA designee shall provide copies of the discharge summary to both the DES Case Manager and the CMDP Behavioral Health Services Unit within five days of completion.

G. Continuity of Care

DHS and DES shall comply with all applicable rules and regulations and jointly work together to ensure that continuity of care is maintained for all children who receive medically necessary services in accordance with this agreement.

H. Quality Management and Utilization Management

1. DES Responsibilities

DES/DCYF shall forward to DHS and the RBHAs the findings of any quality management or utilization review studies that it conducts on Eligible Children receiving Title XIX and Title XXI behavioral health services through the RBHA system and quality management or utilization management studies conducted on RBHA contracted providers.

2. DHS Responsibilities

- a. DHS shall update annually the Statewide Quality Management and Utilization Management (QM/UM) Plan to include, at a minimum, all the federal regulations related to QM/UM as set forth in Chapter 41, and 42 of the Code of Federal Regulations.

- b. DHS shall forward to DES/DCYF and the RBHAs the findings of any quality management or utilization management studies that it conducts on Eligible Children receiving Title XIX and Title XXI behavioral health services through the RBHA system and any quality management or utilization management studies that it conducts on providers serving DES children.

I. Claims Management for Title XIX, Title XXI, and Subvention Reimbursable Services for Eligible Children.

1. DES Responsibilities

- a. DES shall directly reimburse their providers for the Non-Title XIX and Non-Title XXI reimbursable services provided to Eligible Children except as provided in F.2.b. of this Agreement.
- b. Upon request, DES shall provide DHS a roster identifying the Eligible Children referred to the RBHAs for behavioral health services.
- c. DES shall be responsible for the cost of case management services provided by DES.
- d. If the Juvenile Court orders an Eligible Child to be placed in a Non-Title XIX/Non-Title XXI reimbursable setting or to receive non-Title XIX/Non-Title XXI reimbursable behavioral health services, payment for the services/settings shall be the responsibility of DES.

2. DHS Responsibilities

- a. DHS shall provide DES with the results of reconciling the roster of Eligible Children with Children enrolled in a RBHA by the twenty-fifth day of each month provided a DES roster has been received in that month.
- b. DHS contracted RBHAs shall process claims for services which appear on an approved Title XIX or Title XXI service plan in accordance with DHS policy.
- c. DHS and the RBHAs shall be responsible for the cost of Case Coordination and Case Management services provided by RBHAs or their Providers.
- d. DHS and the RBHAs shall be responsible for the cost of both placements when an Eligible Child is moved from one level of care to another within the behavioral health continuum based on medical necessity. During such transitions, the RBHA behavioral health case manager, psychiatrist or therapist, in coordination with the DES case manager, shall develop a transition/discharge plan prior to the transition to ensure that behavioral health services are delivered without interruption or delay.

J. Appeal Process

DES and DHS shall comply with the ADHS/DBHS Policy 2.16 for resolution of appeals. It is the policy of DES and DHS to encourage resolution of any appeal or dispute at the lowest possible level.

K. Coordination Efforts

1. DHS and DES agree to participate in the periodic review and revisions of the Operations Manual and to jointly manage the procedures outlined in the Operations Manual.

- a. DHS and DES agree to meet periodically to identify and resolve service delivery system issues.
- b. DHS and DES agree that all Behavioral Health Standards developed which affect the provision of behavioral health services to Eligible Children shall be reviewed with input from each agency prior to implementation.
- c. In the event of a dispute under this Agreement, the parties agree to make a good faith attempt to resolve the dispute prior to taking formal action.
- d. If the dispute cannot be resolved pursuant to subsection K.1.c. above, the dispute shall be resolved by the Assistant Director of DES, Division of Children, Youth and Families and the Assistant Director of the DHS, Division of Behavioral Health Services.
- e. DHS and DES shall designate staff to serve on a joint compliance committee to meet regularly to review compliance concerns, recommend changes, and monitor the progress on the mutual objectives of this agreement.

2. Model Court

DES and BHS shall coordinate, communicate, and expedite social and behavioral health services to reduce the amount of time children spend in the custody of the state and to find permanent placement for children through the Model Court Project. When there is co-location of RBHA and DES staff, DES shall provide in-kind, the space and equipment necessary for co-location of RBHA staff. Co-location agreements shall be specified in a Memorandum of Understanding signed by the RBHA Director, and the Assistant Director, Division of Children, Youth and Families, DES.

L. Audits

DHS shall make available for inspection by DES the audits of the RBHAs and the applicable providers no later than fifteen (15) days of receipt of the audit by DHS.

M. Notices

All notices or other correspondence between the parties regarding this Agreement shall be mailed or delivered to the respective parties at the following addresses:

DHS

Ronald J. Smith
Assistant Director
Division of Behavioral
Health Services
2122 E. Highland, #100
Phoenix, Arizona 85016

DES

Anna Arnold
Acting Assistant Director
Division of Children Youth
and Families
1789 W. Jefferson St.
Phoenix, Arizona 85007

N. Amendments

1. No condition or requirement contained in or made a part of this Agreement shall be waived or modified without an approved, written amendment to this Agreement. Amendment shall be effective only if in writing and signed by all parties. The terms and provisions of this Agreement shall, except as to the extent so amended, remain in full force and effect.
2. Subsection N.1. above notwithstanding, the parties shall give notice to each other of any non-material alteration to this Agreement. Non-material alterations do not require a written amendment and are:
 - a. Change of address;
 - b. Change of telephone number;
 - c. Change of authorized signatory;
 - d. Changes in the name and/or address of the person to whom notices are to be sent.

O. Compliance with Non-Discrimination Laws

Except as provided in Section 703 of Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000e-2-(i), which permits preferential employment treatment of individual Indians, the parties shall comply with Title VII of the Civil Rights Act of 1964, as amended, the Age Discrimination in Employment Act of 1975 and the State Executive Order No. 99-4 which mandates that all persons, regardless of race, color, religion, sex, age, national origin or political affiliation, shall have equal access to employment opportunities. The parties shall comply with Section 503 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination in the employment or advancement in employment of qualified persons because of physical or mental handicap. The parties shall

comply with Title VI of the Civil Rights Act of 1964, as amended, which prohibits the denial of benefits or participation in services on the basis of race, color, or national origin. The parties shall comply with the Americans with Disabilities Act and the Arizona Disability Act. The parties shall comply with the Vietnam Era Veteran's Readjustment Act of 1973, as amended, and the Rehabilitation Act of 1973, as amended, and as implemented by 41 C.F.R. Part 60 as prescribed in 41 C.F.R. 60-250.4 (n) and 41 C.F.R. 60-741.4(f).

P. Termination

This Agreement may be terminated without cause upon thirty (30) days notice by either party during the term of this contract. This Agreement is subject to the provisions of ARS 38-511.

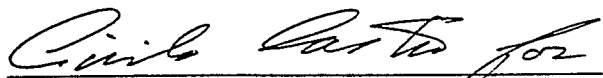
In the event of termination as provided in this Section, the DHS shall stop all work as specified in the notice of termination and immediately notify all Subcontractors in writing to do the same.

VI. Financial Compensation

There shall be no transfer or payment of funds between DHS and DES under this agreement except as provided in Section V.F.1.a of this agreement regarding the ADHS/DBHS Policy 2.16 for resolution of Appeals.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the date written below:

ARIZONA DEPARTMENT OF HEALTH SERVICES



For Jean A. Clark, CPPO, C.P.M., CPM
Procurement Administrator

3/14/00
Date

ARIZONA DEPARTMENT OF ECONOMIC SECURITY

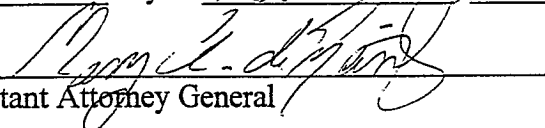


For John L. Clayton, Director
E1340106

4-11-00
Date

In accordance with ARS 11-952 this Agreement has been reviewed by the undersigned who have determined that this agreement is in the appropriate form and within the powers and authority granted to each respective public body.

This 6th day of March, 2000

By: 
Assistant Attorney General

This 28th day of March, 2000

By: 
Assistant Attorney General

APPENDIX A

HIERARCHY OF CASE MANAGEMENT SERVICES & CASE MANAGEMENT RESPONSIBILITY MATRIX

HIERARCHY OF CASE MANAGEMENT SERVICES

Characteristics

Case Management Responsibility

1. If the child is developmentally disabled and receiving services from DES/DDD:

If the child is also dependent and/or on probation: DES/DDD is primary and DES/ACYF and/or JPO are Secondary.
2. If the child has been adjudicated to DJC:

If the child is also dependent: DJC is primary
DES is Secondary

If the Child is also on probation: Juvenile Probation is Secondary
3. If the child is dependent: DES/ACYF

If the child is also in detention: Juvenile Probation is responsible for case coordination due to having the over riding legal jurisdiction

If the child is also on probation: DES/ACYF is the Primary
JPO is Secondary
4. If the child is on probation: Juvenile Probation is Primary
5. If the answer is no to all of the above: The Regional Behavioral Health Authority or contracted Provider have Primary case management responsibility

**Children's Behavioral Health Intergovernmental Agreement
Case Management Workgroup
STATE AGENCY RESPONSIBILITIES**

DESCRIPTION		DES ACTF	DES/ID	AOC	DJC	RBHA DHS
IDENTIFICATION (Prior to Mental Health Referral)		IMPERATIVES/REQUIREMENTS				
• Verify current Title XIX and Title XXI eligibility.	Policy/Procedure	X	X	X	X	
• Identify that there is a potential third party resource available using the information supplied by AHCCCS on the eligibility roster. ¹	In statute - DES/DHS/AHCCCS State Law	X	X			X
• Determine the need for referral to the RBHA.	Policy/Procedure	X	X	X	X	
INTAKE/SCREENING		IMPERATIVES/REQUIREMENTS				
• Complete Intake Assessment A & B.	DHS Policy					X
• Complete consent to treat form.	Statute/Law					X
• Complete release forms.	Statute/Law					X
• Complete client rights and grievance notification procedures.	Statute/Law					X
• Complete client fact sheet.	DHS Policy					X
• Provide background information to RBHA or designee (including existing behavioral health records, demographic information and social history). ²	Policy/Procedure	X	X	X	X	
• Re-verify Title XIX/Title XXI eligibility.	Policy/Procedure					X

¹ This responsibility is only being done by DHS and DES at this time.

² School districts required to follow the RBHA referral process and provide information to the RBHA.

DESCRIPTION		DES AGYE	DES/DD	AOC	DJC	RBHA DHS
• Screen for Title XIX and Title XXI behavioral health services.	AHCCCS regulations					X
• Provide transportation to and attend intake/screening sessions.	Policy/Procedure	X	X	X ³	X	X ⁴
EVALUATION AND DIAGNOSIS AND INDIVIDUALIZED SERVICE PLAN DEVELOPMENT		IMPERATIVES/REQUIREMENTS				
• Perform assessment.	DHS Policy					X
• Complete ALFA and determine case management status.	DHS Policy					X
• Provide Clinical Team Review for Intensive Case Managed (ICM) children.	DHS Policy					X
• Participate in Clinical Team Review for ICM children.	Policy/Procedure	X	X	X	X	X
• Determine child's need for behavioral health services.	AHCCCS requirement					X
• Select provider to deliver medically appropriate services.	Procedure					X
• Recommendation to RBHA of provider to complete the evaluation, diagnosis and individualized service plan for service coordinated children.	Procedure	X	X	X	X	
• Develop and maintain an Individualized Service Plan.	Policy/AHCCCS & HCFA requirement					X
• Develop a Service Authorization.	Procedure					X
• Ensures a Certificate of Need is performed appropriately.	AHCCCS/HCFA requirements					X
• Develop a Discharge Plan as part of ISP.	AHCCCS requirement					X

³ If child is detained, the Court is responsible for transportation to intake/screening.

⁴ If screening and intake are done separately, RBHA becomes responsible for transportation to intake if services are determined medically necessary.

DESCRIPTION		DES ACVF	DES/DD	AOC	DJC	RBHA DHS
• Sign the ISP indicating the plan has been reviewed.	Policy/Procedure	X	X	X	X	
• Coordinate ISP with the Agency/Court Case Plan: (PCP, Family, School, Youth, Courts, Ancillary Providers)	Statute/Law	X	X	X	X	X
• Apply for Educational Voucher. ⁵	Statute	X	X	X	X	X
• Participate in the development of the Individual Education Plan.	Statute/Policy	X	X	X	X	X
• Obtain services and ensure the Eligible Child is receiving all medically necessary behavioral health services.	AHCCCS requirement					X
• Coordinate, arrange and provide, if necessary, transportation for medically necessary behavioral health services.	AHCCCS requirement					X
• Provides ISP and other relevant behavioral health information to state agency and service provider.	Policy/Procedure					X
ONGOING CASE COORDINATION						
IMPERATIVES/REQUIREMENTS						
• Incorporate information from the behavioral health diagnosis, treatment plan and ISP into the Eligible Child's overall case plan.	Policy/Procedure	X	X	X	X	
• Record and coordinate this behavioral health information with the court and other relevant parties, as appropriate.	Policy/Procedure	X	X	X		
• Include RBHA Case Manager or RBHA designee in the Attachment A and minute entry endorsements, if applicable.	Policy/Procedure	X	X	X		
• Notify the RBHA Case Manager or RBHA designee of court hearings.	Policy/Procedure	X	X	X		

⁵ The responsible agency is determined by the agency as indicated in case management hierarchy. Vouchers only apply to children placed in private residential facilities as defined by statute.

DESCRIPTION		DES ACYF	DES/DD	AOC	DJC	RBHA DHS
• Attend Foster Care Review Board hearings.	Statute	X	X	X		
• Receive and review court minutes.	Policy/Procedure	X	X	X	X	X
• Provide monthly reports to the Agency/Court Case Manager for case managed children and as necessary to comply with Juvenile Court requirements.	Policy/Statute as required					X
• Provide quarterly summary reports to the Agency/Court Case Manager for case coordinated children and as necessary to comply with Juvenile court requirements.	Policy/Statute as required					X
• Obtain ancillary services, benefits, non-title XIX services, or entitlements that may augment individual progress.	Policy/Procedure	X	X	X	X	
• Monitor Eligible Child's progress toward the ISP goals.	Policy/Procedure	X	X	X	X	X
• Serve as primary contact and resource person to resolve issues which impede the Eligible child's progress and access to behavioral health services.	Statute					X
• Serve as primary contact and resource person to resolve issues which impede the eligible Child's progress and access to services related to overall case plan, other than behavioral health.	Statute	X	X	X	X	
• Ensure appropriate interface with the family, foster family, courts, school and other relevant parties. ⁶	Policy/Procedure	X	X	X	X	X
• Notify the Agency/Court Case Manager of changes required in the ISP.	AHCCCS					X
• Notify the RBHA Case Manager or RBHA designee of changes in the Agency/Court Case Plan	Policy/Procedure	X	X	X	X	

⁶ See Hierarchy of Case Management Guidelines

DESCRIPTION		DES ACTF	DES/DD	AOC	DJC	RBHA DHS
DISCHARGE PLANNING		IMPERATIVES/REQUIREMENTS				
<ul style="list-style-type: none"> RBHA notifies the Primary Case Manager in writing of anticipated acute inpatient hospital discharge within 48 hours, or anticipated RTC and out-of-home discharge 10 working days prior to discharge. 	Policy/Procedure					X
<ul style="list-style-type: none"> Primary Case Manager notifies ADE/LEA in writing of anticipated acute hospital discharge within 48 hours, anticipated RTC/out-of-home discharge 10 working days prior to discharge or immediately following court order, if no previous notice is given. 	Policy/Procedure	X	X	X	X	X
<ul style="list-style-type: none"> Develop a discharge plan which will consist of any behavioral health services which are medically appropriate in coordination with state agency. 	AHCCCS					X
<ul style="list-style-type: none"> Prepare a discharge summary. 	Policy					X
<ul style="list-style-type: none"> Coordinate discharge plan with Agency/Court Case Manager. 	Policy/Procedure	X	X	X	X	X